



City of Portland Parks and Recreation 2009 Spring Coed Kickball League Registration Form

Team Name _____

Team Manager

Name: _____

Address: _____

Phone: Home _____
 Cell _____

Email: _____

Sponsor (if applicable)

Name: _____

Address: _____

Phone: Bus. _____

Check	League	Day	Games	Registration Deadline	Fees
	Adult	Friday	8	April 29, 2009	\$80.00

** The above fee includes the team fee and player fees **

Location:

All games will be played at Powers Park

Season Dates:

Friday May 15 – Mid/End June
 4 Weeks – Double Header Each Week

Additional Information:

Please fill out this form and return it to the Recreation Department located inside City Hall, 259 Kent Street. Hours 8:00 am – 5:00 pm.

A minimum of 10 players per team.

For questions please call 517-647-3207.

**** Player Roster On The Reverse Side ****

Coed Kickball Player Roster

Name	Address (street, city & zip)	Township	Phone	Signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

I hereby, for myself, my heirs, executors and administrators waive and release any and all rights and claims for damages I may have against the City of Portland, their respective agents or any facility used for this recreational program, for any and all injuries which may be suffered by my dependents in connection with my participation in said program. I further represent that I carry medical-hospital insurance and I understand that the City does not provide such insurance coverage for me. Photographs & videos may be taken at certain Parks and Recreation Department activities and unless The Parks and Recreation office receives written signed obligation, photos may be reproduced in department publications.

Manager's Signature _____

